

**PART B—ISSUE FEE TRANSMITTAL**

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Assistant Commissioner for Patents  
Washington, D.C. 20231

11/14/2001

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CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

IM62/0912

THOMPSON HINE & FLORY LLP  
ATTN THEODORE D LIENESCH  
2000 COURTHOUSE PLAZA N E  
P O BOX 8801  
DAYTON OH 45401-8801

Note: The certificate of mailing below can only be used for domestic mailings of the Issue Fee Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing.

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Collette Crawford (Depositor's name)  
*Collette Crawford* (Signature)  
11-9-00 (Date)

APPLICATION NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
09/450,632	11/24/99	012	COMBS, J	1742 09/12/00
First Named Applicant	TETSURO,	35 USC 154(b) term ext.	=	0 Days.

TITLE OF INVENTION LEAD-FREE SOLDER ALLOY

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEES DUE	DATE DUE
1 550718.00070	420-560.000	S14	UTILITY	YES	\$620.00 \$605.00	12/12/00

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Use of PTO form(s) and Customer Number are recommended, but not required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Thompson Hine &  
Flory LLP

2 P.O. Box 8801

3 Dayton OH 45401-8801

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

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Issue Fee

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(ENCLOSE AN EXTRA COPY OF THIS FORM)

Issue Fee (any deficiencies) 00

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(A) NAME OF ASSIGNEE Nihon Superior Sha Co., Ltd.

(B) RESIDENCE: (CITY & STATE OR COUNTRY) Japan

Please check the appropriate assignee category indicated below (will not be printed on the patent)

individual

corporation or other private group entity

government

The COMMISSIONER OF PATENTS AND TRADEMARKS IS requested to apply the Issue Fee to the application identified above.

(Authorized Signature)

(Date)

11/9/00

NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

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